

Substitute for form 1449A&B/PTO INFORMATION DISCLOSURE STATEMENT BY APPLICANT (Use as many sheets as necessary)				Complete if Known	
				Application Number	10/561,304
				Filing Date	December 19, 2005
				First Named Inventor	Del Borgo, Mark
				Art Unit	1654
				Examiner Name	Ronald T. Niebauer
Sheet	1	of	1	Attorney Docket Number	087521-000000US

U.S. PATENT DOCUMENTS						
Examiner Initials*	Cite No. ¹	Document Number		Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
		Number Kind Code ² (if known)				
	AA	US-				

FOREIGN PATENT DOCUMENTS								
Examiner Initials*	Cite No. ¹	Foreign Patent Document			Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear	T ²
		Country Code ³	Number ⁴	Kind Code ⁵ (if known)				
	AB	EP	0251615	A	01/07/1988	Genentech, Inc.		<input type="checkbox"/>
	AC	WO	03/030930	A	04/17/2003	Howard Florey Institutue		<input type="checkbox"/>
	AD							<input type="checkbox"/>
	AE							<input type="checkbox"/>
	AF							<input type="checkbox"/>

NON PATENT LITERATURE DOCUMENTS			
Examiner Initials *	Cite No. ¹	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.	T ²
	BA	M.P. DEL BORGIO <i>et al.</i> ; Analogs of insulin-like Peptide 3 (INSL3) B-chain are LGR8 Antagonists <i>in Vitro</i> and <i>in Vivo</i> ; Journal of Biological Chemistry; May, 2006; pp 13068-13074; Vol. 28; No. 19.	<input type="checkbox"/>

Examiner Signature		Date Considered	
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*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

¹ Applicant's unique citation designation number (optional). ² Applicant is to place a check mark here if English language Translation is attached.